### FEDERAL ELECTION COMMISSION

RECEIVED FEC MAIL CENTER

2018 APR -5 AM 11: 34

999 E Street NW

Washington, DC 20463

**BRITTANY CLARK** 

WE THE PEOPLE FOR CLARK 2018

P.O. Box 0274

Lake Arrowhead, CA 92352-0274

March 26, 2018

Dear Federal Election Commission,

Please see the revised FEC FORM 1 STATEMENT OF ORGANIZATION, the revised FEC FORM 2 STATEMENT OF CANDIDACY, and the FEC FORM 3P REPORT OF RECEIPTS AND DISBURSEMENTS for the due APRIL QUARTERLY REPORT [12/31/2017 – 03/31/2018].

This submittal of the FEC FORM 3P REPORT OF RECEIPTS AND DISBURSEMENTS will be the termination report from this committee, C00556951 for candidate, P60005154.

The Presidential Transition Period is April 15 (Q1) – July 15 (Q2).

The Administration to be established by July 16, 2018.

Thank you for your time and efforts.

Warm Regards,

Brittany Clark

President of the United States

**Enclosures:** 

FEC FORM 1 FEC FORM 2 FEC FORM 3P

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## FEC FORM 2 STATEMENT OF CANDIDACY

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FEC FORM 2 (REV. 02/2009)

1. (a) Name of Candidate (in full) BRITTANY CLARK	ZUID AFN J KITT		
(b) Address (number and street) P.D. BOX 0274	2. FEC Candidate Identification Number $P(0.005/54)$		
(c) City, State, and ZIP Code LAKE ARROWHEAD, A 935	3. Is This New (N) OR (A)		
4. Party Affiliation 5. Office Sought 6. State	& District of Candidate		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE			
	2018		
(year of election)			
NOTE: This designation should be filed with the appropriate office listed in the instructions.			
(a) Name of Committee (in full)  WE THE PEOPLE FOR CLARK	2018		
(b) Address (number and street) P. 0 - BOX 0274			
(c) City, State, and ZIP Code  LAKE ARROWHEAD, CA 923	352		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.  NOTE: This designation should be filed with the principal campaign committee.			
(a) Name of Committee (in full)	·		
(b) Address (number and street)			
(c) City, State, and ZIP Code			
I certify that I have examined this Statement and to the best of my knowle	edge and belief it is true, correct and complete.		
Signature of Candidate  Dullul	03/24/2018		
NOTE: Submission of false, erroneous, or incomplete information may subject the person	n signing this Statement to penalties of 52 U.S.C. §30109.		
9-00068	FFC FORM 2 (REV 02/2008		

FEC Form 2S (Revised 02/2017)

### **Optional Supplemental Page for Designation** of Additional Authorized Committees

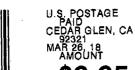


# **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives)

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	(a) Name of Committee (in full)		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code		
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.		
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Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
pf	4/5/2018
(3/2015)	DATE PREPARED